### 2001

### Consumer Satisfaction

for

# Southeast Missouri Mental Health Center-Farmington

Inpatient Services

Division of Comprehensive Psychiatric Services Missouri Department of Mental Health Inpatient Facilities



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Thanks to the many people who completed the survey and to the staff of participating agencies. Thanks to the members of the Consumer Satisfaction Work Group, the Outcomes Work Group and the Performance Measurement Group.



August 2001

# DMH Satisfaction Survey Results Consumer Satisfaction - 2001

Comprehensive Psychiatric Services-Inpatient Facilities

Agency: Southeast Missouri Mental Health Center

### Demographics

	Total S	5erved	Agency Survey Returns					
			Total	Total	Adult Acute	Adult Long		
	State	Agency	State	Consumers	Care	Term		
SEX Male	74.2%	74.8%	76.8%	59.1%	57.5%	61.5%		
Female	25.8%	25.2%	23.2%	40.9%	42.5%	38.5%		
<b>RACE</b> White	63.4%	82.1%	61.8%	95.2%	97.4%	92.0%		
Black	33.1%	15.7%	27.1%	4.8%	2.6%	8.0%		
Hispanic	1.2%	0%	1.8%	0%	0%	0%		
Native American	0.3%	0%	2.3%	0%	0%	0%		
Pacific Islander	0.2%	0%	0.2%	0%	0%	0%		
Other	1.9%	2.1%	6.9%	0%	0%	0%		
MEAN AGE			35.66	37.98	36.26	40.68		
0-17	8.1%	1.9%	11.7%	1.6%	2.6%	0%		
18-49	73.0%	74.0%	71.1%	76.6%	79.5%	72.0%		
50+	18.9%	24.1%	17.3%	21.9%	17.9%	28.0%		

## Sample Size

Information is based on the number of returned forms and the number of people served according to DMH billing records.

	Number Served April 2001	Number Forms Returned	Percent of Served Returned
Total State	1851	681	36.8%
Total Agency	369	74	20.1%
Adult Acute Care	157	45	28.7%
Adult Long Term	233	29	12.4%
*Unduplicated Count			

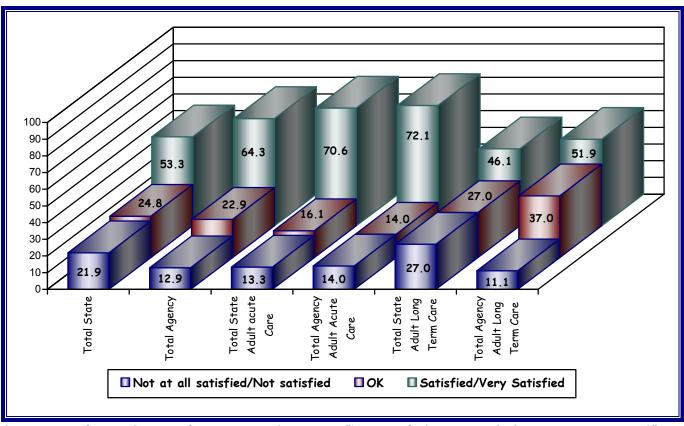
### Services for the Deaf or Hard of Hearing

The following represents the percentage of affirmative responses for each item.

	Overall Agency Totals			ult Care	Adult Long-term Care Total		
	State	Agency	State	Agency	State	Agency	
Are you deaf or hard of hearing?	11.6%	3.2%	7.3%	5.1%	14.3%	0%	
If yes, do you use sign language?	27.5%	0%	33.3%	0%	26.3%	0%	
If you use sign language, did this agency use sign language without the help of an interpreter?	43.2%	0%	50.0%	0%	43.8%	0%	
If you use sign language and the staff did not sign to you, was an interpreter provided?	34.3%	0%	40.0%	0%	34.5%	0%	

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### Overall Satisfaction with Services

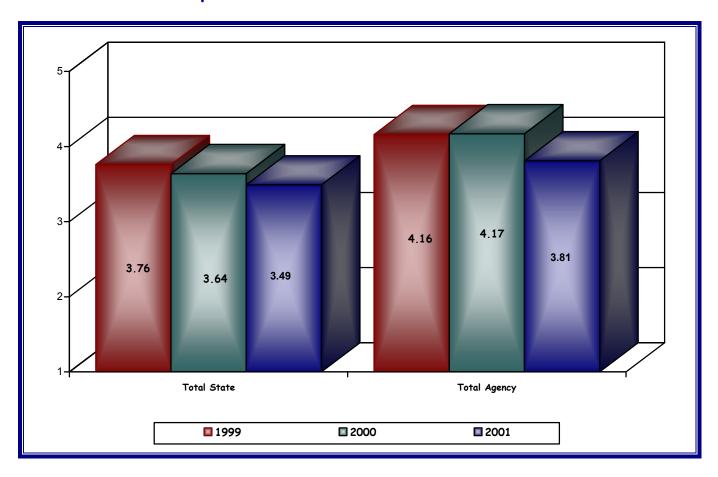


Program Satisfaction: Percent of responses to the question "How satisfied are you with the services you receive?"

#### Some of the key findings were:

- Statewide, 53.3% of the consumers of CPS Inpatient Facilities who responded to the survey were "satisfied" or "very satisfied" with their services.
- The percent of individuals who rated services as "satisfied" or "very satisfied" was higher than the state average (64.3% for this agency versus 53.3% for the state).
- This agency's Adult Long Term Care program was rated higher (51.9% of the consumers reporting "satisfied" or "very satisfied") than the statewide rating (46.1%).

# Service Means Comparison of 1999, 2000, & 2001



Comparison of 1999, 2000, & 2001 Mean Ratings

#### Some of the key findings were:

- The mean of the responses to the question "How satisfied are you with the services you received?" was 4.16 in 1999, 4.17 in 2000 and 3.81 in 2001.
- For this agency, the mean of the responses to the service question decreased from year 1999 (mean= 4.16) to year 2001 (mean= 3.81).

### Satisfaction with Services

	Total Consumers		Adult Acute Care		Adult Long-term Care	
How satisfied are you	State	Agency	State	Agency	State	Agency
with the staff who some way?	3.55	4.01	4.08	4.21	3.36	3.71
with the staff who serve you?	(642)	(70)	(141)	(42)	(429)	(28)
that at af 6 /t ma at mount and halmful to	3.57	3.94	4.08	4.19	3.35	3.56
that staff/treatment are helpful to you?	(642)	(70)	(143)	(43)	(426)	(27)
with how staff keep things about you and	3.62	3.93	4.01	4.20	3.47	3.52
your life confidential?	(638)	(67)	(140)	(40)	(428)	(27)
that your treatment plan has what you	3.35	3.72	3.85	3.85	3.15	3.52
want in it?	(627)	(65)	(137)	(40)	(419)	(25)
that your treatment plan is followed by	3.55	3.82	3.95	3.98	3.36	3.58
those who assist you?	(629)	(68)	(139)	(42)	(418)	(26)
that the agency staff respect your ethnic	3.64	4.00	4.05	4.10	3.43	3.85
and cultural background?	(621)	(66)	(139)	(40)	(412)	(26)
	3.49	3.81	3.93	3.91	3.28	3.67
with the services that you receive?	(636)	(70)	(143)	(43)	(423)	(27)
that staff treats you with respect,	3.53	4.03	4.03	4.12	3.35	3.89
courtesy, caring, and kindness?	(645)	(71)	(143)	(43)	(431)	(28)
that the environment is clean and	3.60	4.15	4.15	4.30	3.44	3.93
comfortable?	(648)	(71)	(143)	(43)	(433)	(28)
that the meals are good, nutritious and	3.34	3.83	3.80	3.84	3.29	3.82
sufficient amounts?	(645)	(72)	(145)	(44)	(428)	(28)
How safe do you feel						
in all in Carillano	3.56	4.10	4.03	4.16	3.32	4.00
in this facility?	(643)	(70)	(145)	(44)	(427)	(26)

How satisfied are you? Scale: 1=Not at all satisfied . . . 5=Very satisfied.

How safe do you feel? Scale: 1=Not at all safe . . . 5=Very safe.

The number in parentheses represents the number responding to this item.

#### Some of the key findings were:

- Statewide, the people served by the CPS Inpatient Facilities reported that they were satisfied with the services they received. For this agency the mean scores ranged from 3.72 to 4.14. (1=not satisfied...5=very satisfied)
- The people were most satisfied with the environment being clean and comfortable. They were least satisfied with the content of the treatment plan.

### Previous Feedback

The last page of the survey offered people the opportunity to address any issues by writing in comments. These hand-written comments were copied and faxed back to your agency as they were received. The primary purposes for this action was to allow for immediate feedback from the people you serve, to give you the opportunity to make any necessary improvements, and to pass along compliments to your staff.

### Sampling Methodology

Consumer Satisfaction Forms were given to people served by ADA and CPS during April 2001. For MRDD, data was collected through interviews.

People who received services from more than one program or agency received more than one survey. Therefore, some people completed more than one survey.

While this method may not have achieved a sufficient sample size to represent the opinions of all people who receive services from each provider, the survey has provided people with an opportunity to express their opinions and concerns. Giving the majority of people who receive DMH services a quick and simple way to express opinions and concerns about service quality is a major aim of this process.

### Use of Data and Quality Improvement

The methods of data collection, the survey content and the survey results should all be considered in terms of quality improvement. The Missouri Department of Mental Health Satisfaction Survey has been designed as a quality improvement process, not as traditional mental health research.

There are two primary uses of this data. First, this data gives the Department of Mental Health an expression of the level of satisfaction of the people served by the Missouri DMH system as a whole.

Second, this data is designed to support quality improvement processes at the provider level. Each provider will have a basis upon which to compare the level of satisfaction of the people who receive services at their agency with other providers of their type and the state as a whole. This comparison makes it possible for each provider to improve the quality of the services they offer. In addition, each provider can get a clear idea of some of the issues that are important to the people they serve.

It is important to understand the context of services at each agency when interpreting the meaning of survey results. Differences in the population served at each agency, variations in service provision, and particular cultural characteristics of the community in which services take place must be taken into account as providers use this information to improve the quality of services. This report does not attempt to take into account these variations. As your agency engages in quality improvement, it is your responsibility to understand and take into account these local variations in order to make the most of the information contained within this report.

Please forward any suggestions for improvement of the survey process to Gary Harbison, Outcomes, Missouri Department of Mental Health, PO Box 687, Jefferson City, Missouri 65102. Additional information about survey results may be obtained by contacting Christine Rinck, Ph.D., University of Missouri-Kansas City Institute for Human Development, 2220 Holmes, 3rd Floor, Kansas City, Missouri 64108.

Agency: Southeast Missouri Mental Health Center

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